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Bib Data Sheet

CONFIRMATION NO. 1315

SERIAL NUMBER 10/635,066	FILING OR 371(c) DATE 08/05/2003 RULE	CLASS 604	GROUP ART UNIT 3763	ATTORNEY DOCKET NO. 102-523 DIV/CON/CIP/CON
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APPLICANTS

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**** CONTINUING DATA *******

This application is a CON of 09/809,469 03/15/2001 PAT 6,629,963 which is a CIP of 09/454,993
 12/06/1999 ABN
 which is a CON of 09/040,067 03/17/1998 PAT 6,009,933
 which is a DIV of 08/670,255 06/20/1996 PAT 5,752,942

**** FOREIGN APPLICATIONS *********IF REQUIRED, FOREIGN FILING LICENSE GRANTED****** 11/01/2003**

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY NJ	SHEETS DRAWING 4	TOTAL CLAIMS 64	INDEPENDENT CLAIMS 9
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials <i>MPD</i>				

ADDRESS

32752

TITLE

Multi-beveled point needle and syringe having a multi-beveled point needle

FILING FEE RECEIVED 2046	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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